

# Junior Police Academy Application Packet



The Norman Junior Police Academy is accepting applications from students entering the 7<sup>th</sup>, 8<sup>th</sup>, or 9<sup>th</sup> grade. The purpose of the Academy is to foster relationships that will bridge the gaps between law enforcement and youth while also exposing them to future careers in serving their community. The goal of the program is to motivate young people to be outstanding citizens and to empower them to act as a positive influence in our community. The two week Academy blends classroom learning with hands on activities to expose Junior Cadets to a variety of topics including: fitness, patrol tactics, criminal investigations, traffic safety, self-defense, firearms safety, and internet dangers.

The Academy meets Monday through Thursday from 8:30 a.m. to 12:30 p.m. during two consecutive weeks. Cadets will be expected to be on time each day and should be picked up no later than 12:45 p.m. There is no cost to attend. Snacks and water will be available at no cost.

There are a limited number of openings. To be considered, all forms must be complete and include two recommendations, signed releases and waivers, and a short essay. Priority is given to applicants residing within the City of Norman.

The summer 2014 Junior Police Academy is July 14-17 and 21-24 (8:30 a.m. – 12:30 p.m. each day). The deadline for the application is May30, 2014.

#### Packet Contents:

- Application
- Recommendations
- Medical Release Form
- Participation Guidelines
- Essay Guidelines

Completed application packets can be returned to the Norman Police Department Records Division c/o Lt. Lance Arnold, 201-B West Gray Street, Norman, OK 73069.

For more information contact Lt. Lance Arnold at juniorpoliceacademy@normanok.gov or 405-292-9723 ext. 2.



## **Norman Junior Police Academy Application**

Please Print



Name: Last	First	MI
Address:	Street/City/ Zip)	
Phone:	, ,	
Grade for 2014/2015 School Year:	(circle one) 7	8 9
School:	City:	
Shirt Size: (circle one) Adult S	M L XL X	(XL
Parent or Guardian Name:		
Phone:	Second Phone: _	
Email:		
Emergency Contact Name:		
Phone:	Second Phone:	
In consideration of the benefits that my child will receive from his/her participation in the Norman Police Department's Junior Police Academy sponsored by the Norman Police Department, I do hereby release the City of Norman, its police officers, public officials, agents and employees of any and all liability, claims, demands, actions, and causes of action which I may hereafter have on account of any and all injuries and damages to my child or to my property arising out of or related to any happening or occurrence while my child is participating in the academy. I attest my child is physically fit and able to attend the Norman Junior Police Academy. I also authorize the staff of the Norman Police Department to transport my child to locations for academy programs. I give permission to the Norman Police Department to use or release any media (photographs, video, etc.) involving my child while participating in the Norman Junior Police Academy. I understand that this media may be released to local newspapers, television stations, and/or included on Norman Police Department official websites and other promotional material for the Norman Police Department.		
Signature of Parent or Guardian	Ē	Date



#### **Norman Junior Police Academy**





Each applicant is required to have two recommendations. Acceptable recommendations can be from the following:

- Your current school Principal/Administrator
- Your current school Counselor
- A teacher or other staff member at your school.

Applicant Name:				
The above named applicant is applying to attend the Norman Junior Police Academy. By signing below you are providing them with your recommendation.				
Recommendation # 1				
Name:	Phone Number:			
Relationship to applicant:				
Signature:		Date:		
Recommendation # 2				
Name:	Phone Number:			
Relationship to applicant:				
Signature:		Date:		



### **Norman Junior Police Academy**





I, (pa	arent or guardian's name) her	eby give permission for	or any	
and all medical attention to	be administered to my child	(0	child's	
name) in the event of an ac	ccident, injury, sickness, etc.,	under the direction of	the	
Norman Police Department, until such time as I may be contacted. I also assume				
responsibility for the payme	ent of any such treatment. Th	is release is effective f	or the	
period of the Norman Polic	e Department's Junior Police	Academy.		
Address:	Pho	one:		
Insurance Provider:	ider: Policy Number:			
As the parent or legal guar	dian of the above named min	or, I hereby give my co	onsent	
for emergency medical car	e prescribed by a dully licens	ed Doctor of Medicine	or	
Doctor of Dentistry. This ca	are may be given under whate	ever conditions are ned	cessary	
to preserve the life, limb, o	r wellbeing of my dependent.			
Signature of Parent/Guardi		Date		
Please list any medical cor	nditions or allergies the applic	ant has:		
Please list all medications	regularly taken by the applica	ınt:		



# Norman Junior Police Academy Participation Guidelines



Applicant Name:		
Applicant Name.		

- I agree to follow all directions given by academy staff.
- I understand I am required to be on time for all classes and activities.
- I agree to participate in all class assignments and activities.
- I will immediately report to the academy staff if I become ill or injured.
- I will conduct myself in a professional manner at all times in or out of class.
- I will present a professional appearance while attending the academy.
- I understand that I am not a peace officer and will not attempt to present myself as a peace officer. I will not attempt to enforce any law violations or other legal situations.
- I understand that tardiness, absenteeism, or violation of academy rules can result in my immediate dismissal from the program.

	<u> </u>	
Applicant Signature	Parent/Guardian Signature	

#### **Essay Guidelines**

Attach a one page handwritten or typed essay that answers the following questions:

- 1. Why do you want to attend the Junior Police Academy?
- 2. What do you hope to gain from the experience?
- 3. What is something personally in which you want to improve?